Reviewer's report

Title: Current ICD10 codes are insufficient to clearly distinguish acute myocardial infarction type: a descriptive study

Version: 2 Date: 20 August 2013

Reviewer: Alessandro Barchielli

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Major Compulsory Revisions

The paper need of some other modifications:

1. In the Method sections authors write: “MINAP cover all acute hospitals” (see page 5, last row).
   In the Author’s response to reviews authors specified that Welsh data are incomplete, as some hospitals did not enter data). So they couldn’t compare rates between HES and MINAP. If the MINAP data are incomplete this should be specified in the method section; if they are complete the authors should compare also rates.

2. In the Discussion section authors write
   “Interestingly, (I21.9) (representing the great majority of I21 cases) had also exhibited high values of angioplasty use that might suggest that some of the cases within this large subcategory are in fact STEMI cases.” (page 8)
   In my opinion, the percentage of pts. undergoing angioplasty not is so high. In figure 2 it is lower than 10%! I suggest to modify the sentence avoiding to consider less than 10% an high values.
   Besides, why I21.9 is within brackets?

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interest